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RESPONSE UNDER 37 C.F.R. § 1.116

EXPEDITED PROCEDURE – Art Unit 1634

Attorney Docket No. 42778.8001.US01

AF 1634
I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as First Class Mail in an envelope addressed to: Mail Stop AF, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on:

Date: February 19, 2004

By: *Rena lov*

Rena lov

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

IN RE APPLICATION OF: KORENBERG, JULIE R.

APPLICATION No.: 08/956,991

FILED: OCTOBER 23, 1997

FOR: **NUCLEIC ACID ENCODING DS-CAM
PROTEINS AND PRODUCTS RELATED
THERE TO**

EXAMINER: SWITZER, JULIET
CAROLINE

ART UNIT: 1634

CONF. No: 9464

**Transmittal of Amendment and Response to
Office Action Under 37 C.F.R. §1.116**

Mail Stop AF
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

1. Transmitted herewith are the following:

- ☒ Amendment and Response to Office Action
- ☐ Petition for -Month Extension of Time
- ☐ Terminal Disclaimer
- ☐ Sequence Listing printout, floppy diskette, matching declaration
- ☐ Information Disclosure Statement, Form PTO-1449 (modified),
References
- ☐ Check in the amount of \$

2. Entity Status

- ☒ Small Entity Status (37 C.F.R. § 1.9 and § 1.27) has been previously established.

RESPONSE UNDER 37 C.F.R. § 1.116**EXPEDITED PROCEDURE – Art Unit 1634**

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3. Conditional Petition for Extension of Time:

Applicant petitions for an Extension of Time, if necessary, for timely of this transmittal and enclosures.

4. Fee Calculation and Payment

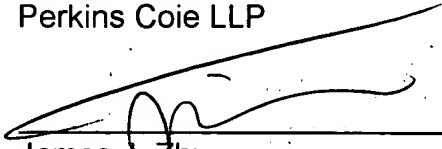
For:	(Col. 1) No. Filed	(Col. 2) No. Extra	Small Entity			Other Than a Small Entity	
			Rate	Fee		Rate	Fee
Total Claims	13 - 41	0	x \$ 9 =	\$	or	x \$ 18 =	\$
Independent Claims	4 - 7	0	x \$ 43 =	\$	or	x \$ 86 =	\$
<input type="checkbox"/> Multiple Dependent Claim Presented			+ \$ 140 =	\$	or	+ \$ 280 =	\$
<input type="checkbox"/> Extension of Time Fee				\$			\$
<input type="checkbox"/> Information Disclosure Statement Fee				\$			
*If the difference in Col. 1 is less than zero, enter "0" in Col. 2.			TOTAL	\$	or	TOTAL	\$

5. Provisional Fee Authorization

Please charge any underpayment in fees for timely filing of this transmittal and enclosures to Deposit Account No. 50-2586.

Respectfully submitted,
Perkins Coie LLP

Date: 2/19/04


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